

APPLICATION FOR INSTITUTIONAL AFFILIATION

(To be filled by the Head/Authorized Representative of the Applicant Institution)

Section A – Institutional Details

1. Name of the Institution: _____
 2. Full Address: _____

 3. District: _____ State: _____ PIN: _____
 4. Phone No.: _____ Mobile No.: _____
 5. Official Email ID: _____
 6. Website (if any): _____
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Section B – Legal Status of the Institution

7. ☐ Trust ☐ Society ☐ Private Limited Company ☐ Other (Specify): _____
 8. Name of the Managing Body/Trust/Society: _____
 9. Registration No. and Date: _____ Valid Upto (if applicable): _____
 10. PAN/TAN/GST (if applicable): _____
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Section C – Programme & Centre Details

11. Type of Centre Applying For:
☐ Study Centre ☐ Skill Training Centre ☐ Online Support Centre ☐ ECCE
Centre ☐ Other: _____
 12. Proposed Mode of Operation: ☐ Online ☐ Offline ☐ Blended
 13. ODLC Course(s) proposed to be offered:
☐ Secondary ☐ Senior Secondary ☐ Vocational / Skill ☐ ECCE ☐ D.El.Ed
 14. Student Intake Capacity (Proposed): _____ per year
 15. Medium of Instruction Offered: ☐ English ☐ Hindi ☐ Bilingual ☐ Other:

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Section D – Infrastructure and Faculty

16. Total Built-up Area: _____ sq. ft.
17. No. of Classrooms: _____ Labs: _____ Library: ☐ Yes ☐ No
18. ICT/Computer Lab Available: ☐ Yes ☐ No

19. Faculty/Trainers Proposed (Attach separate sheet in prescribed format):

Total No.: _____ Qualified as per ODLC norms: _____

Section E – Declarations

20. Has the institution ever been de-affiliated/blacklisted by any board/university/regulator?

☐ No ☐ Yes (If yes, provide details on separate sheet)

21. Documents Attached (Tick all that apply):

- ☐ Registration Certificate of Trust/Society/Company
 - ☐ PAN Card
 - ☐ Address Proof
 - ☐ Infrastructure Declaration
 - ☐ Faculty Profiles
 - ☐ Undertaking on Letterhead/Stamp Paper
 - ☐ Photographs of Premises
 - ☐ Any Previous Academic Affiliation Proof
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Section F – Declaration by the Head of the Institution

I hereby declare that the information provided above is true and correct to the best of my knowledge and belief. I understand that submission of this form does not guarantee affiliation and the decision of ODLC will be final and binding. I also undertake to abide by all rules, guidelines, and conditions laid down by ODLC and any changes made thereto from time to time.

Place: _____

Date: _____

Name of the Applicant: _____

Designation: _____

Signature: _____

Official Seal of the Institution